- that a scientific writer was in place who asked staff to share their peer reviewed work in short briefing notes that were accessible to all, alongside academic and scientific outputs. This dual approach was important for Knowledge Exchange in particular;
- v) that the Deputy Vice-Chancellor (DVC) Chairs the Research & Knowledge Exchange Committee and manages the Research Office and the Research Coordinator. The Research Ethics Committee and Animal Welfare and Ethical Review Body also had vital roles to play in reviewing and approving research proposals;
- vi) that the role of the Finance Office in supporting research bids and costings was very important. Following the internal audit in June 2018, significant progress had been made to strengthen and embed the processes for applying and managing bids. Academic staff had been briefed on the processes and this work would continue as new staff are appointed in the future;
- vii) that the Academic Quality Manual sets out the arrangements for managing the quality of research. The Risk Analysis & Action Plan (RAAP) also describes the key risks and identifies the key measures and mitigation actions that are in place to manage the risks;
- viii) that as identified by RSM in their audit of risk management there would be further briefings for staff about risk management to help colleagues understand how they can help mitigate risks by following agreed processes and/or by identifying new risks and working with the DVC to mitigate these as necessary. The University Secretary would be working with colleagues to brief staff over the next few months;
- ix) that preparations for the REF were in hand including detailed analysis and recording of potentially eligible publications and their impact factors;
- that it would be useful to make Research Ethics arrangements more explicit in the RAAP given possible reputation risks if ethical matters were not fully addressed. This would be reviewed as part of the annual review over the summer period.

 PRM/CEB

Members thanked Professor Mills and he left the meeting at this point.

18/30 Minutes

<u>Approved:</u> the minutes of the meeting of the Audit and Risk Management Committee held on 14 February 2019 (18/17-18/27)

18/31 Matters Arising

Noted:

- that the Board had approved the mapping of Compliance against the Regulatory Framework. Staff responsible for compliance with the various areas covered by the Framework were aware of the obligations and the need to ensure compliance;
- ii) that revised dates for ARMC meetings in 2019/20 had been circulated and noted by members;
- iii) that information on how funds are spent has now been produced in an appropriate format and will be published on the website by the Finance Team;

LF

iv) that the internal audit tender process had been completed. RSM had been reappointed for the period 2019-2024 subject to an initial year and two further 1 year extensions, all of which would be subject to annual review by the Committee. Congratulations were offered to Louise Tweedie and the RSM team

18/32 Risk Management

Received: i) a report from the University Secretary;

ii) an oral update from the Director of Finance on the outcome of the UK research grants;

Noted:

- i) that the OfS had not yet issued confirmation advising institutions on its assessment of institutional risk;
- that the recent changes at Dairy Crest had not affected the links to the University and positive messages about ongoing relationships had been received;
- that plans for a vertical farm had been delayed due to structural changes in the company with which the University had been in discussion. F & GP Committee would be advised at its next meeting;
- iv) that the OfS expectations around Prevent had changed and a new Prevent Review Meeting arrangement was in place where 10% of providers would be audited each year. The 10% would be made up of institutions felt to be a potentially higher risk (eg new providers) and the balance by a random sample of other HEIs. Once a visit was completed and a satisfactory outcome achieved, the HEI would not normally be audited again for three years unless there were major changes during that period. The University would be setting up a Prevent Group to formally review the risk assessment as well as external speaker approval, referrals and staff training arrangements. The group would meet at least annually;
- v) that the NFU Health & Safety Advisor had supported the roll out for all staff of
- vi) that the Mumps outbreak related to HAU students who had played sport at Nottingham Trent University shortly before a mumps outbreak at NTU appeared to have settled down. Students had returned home after Easter and Public Health England had advised this would be helpful to mitigate risk of infection. The affected students had all been vaccinated but PHE had advised that in some instances, vaccinations wear off and so younger people can still be at risk. It was also noted that the University could only advise students on health/vaccination matters,tetdethat the University rsityn-3(on)4(m)-21(att)4(ers)-8(,t t)-8(he)49

- viii) that the news SU Director had taken up his post and would be meeting senior staff as part of his induction;
- that the need to ensure all staff complete the Cyber Security training package was being reinforced with a deadline of 20 May 2019. The Committee supported this approach;

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projects had been very nearly completed; It had been a thorough process with expenditure scrutinised to the last penny. A number of ineligible transactions had been identified; mainly relating to timing of expenditure towards the end of a grant or after its end date. A total of £8k out of £1.9m had been identified that needed to be returned. The Director of Finance & Deputy Vice-Chancellor had agreed management responses and would be progressing these over the coming months;

- xi) that three key recommendations had been identified relating to improving transaction descriptors and ensuring time frames for grants are understood and managed. The overall outcome was the second most positive opinion (moderate assurance);
- xii) that internal and external auditors felt this appeared to be a reasonable
- that the University is clear that undergraduate external examiners must be paid via payroll for taxation reasons. The situation for postgraduate external examiners was less clear and the Director of Finance would look into this and report back;
- that the proposed process appeared to be a pragmatic way to undertake right to work checks where face to face checking of original documents could not be facilitated prior to the appointed person undertaking a specific role as an External Examiner or External Advisor on a validation panel. Bringing forward the appointment for External Examiners for taught programmes would address the largest group and allow face to face checking in advance of work being allocated to individuals:
- that it was understood from legal advisors that other universities had taken the same approach to facilitate checks as fully as possible where face to face checking was not possible until after some work had been undertaken. In light of this the Committee felt the approach was reasonable and went some way to mitigate risks in as practical a way as possible, ensuring face to face checks follow an initial check undertaken at a distance:
- xvi) that further advice from Eversheds would be sought on payroll related matters and the impact of the Right to Work requirements: CEB/LF

18/33 Follow up on Internal Audit Reports

Received: a report from the University Secretary.

Noted: i) that good progress had been made by the University overall, with actions that were not yet due for completion in hand;

- that sector and audit professionals had pressed OfS for clarification and a review of the pay multiple methodology, but it was not thought this would lead to change;
- iv) that the external audit would focus on significant risks similar to those in 2018

18/41 Briefings from Senior Staff

Received: a briefing note from the Chair on briefings received to date:

Noted: i) that the Head of HR would be briefing the Committee in June 2019;

ii) that an update on the Strategic Plan would be a separate item during 2019/20 to ensure

- v) that timetabling/room utilisation and space management would be an area for audit in 2019/20 as previously planned and would be a useful Value for Money focus; RSM
- iv) that Strategic Planning would be moved to 2020/21 to allow the 2020-2025 plan to be developed in 2019/20.